



I.W.W. Co-operative Clearance

In order to maintain I.W.W. Co-operative recognition Co-operatives must submit an annual clearance in last quarter of every calendar year. Please refer to I.W.W. Constitution Article II I.W.W. Shops b) I.W.W. Co-operatives, and MPP Sec 8-4 Co-operative Polices 7. Failure to clear may result in recognition being withdrawn.

Once cleared you will be sent an annual clearance stamp to affix to your Co-operatives Shop Card

Complete and return to GHQ by December 31st each year.

IWW, Post Office Box 180195, Chicago, IL 60618

Contact Information

Who is the contact person

Name _____

Address: _____

City / State or Province / Postal Code: _____

Telephone: _____ E-mail _____

Co-operative I.W.W. Directory Information

Name of Co-operative _____

Address: _____

City / State or Province / Postal Code: _____

Telephone: _____ E-mail _____

Secretaries and Delegates are required to report monthly. Please attach any missing reports

Have there been any changes in your Co-operatives Bylaws? _____ If yes, please attach a copy.

Have there been any changes in regards to the financial commitment of new members? _____

If yes, please show how such a commitment does not place an excessive financial barrier to joining.

Have there been any changes to the products and/or services that the Co-operative provides? _____

If Yes what changes have been made? _____

Is affiliation with the I.W.W. noted on the Co-operatives website, correspondence, and advertising? ____

Does the Co-operative use the I.W.W. Universal Label (union bug)? _____

If yes, please describe how the label is being used, to what products it is affixed, and what steps have been taken to safeguard its integrity.

All I.W.W. recognized Co-operatives must be able to answer yes to all of the following questions:

Do the Co-operative's Bylaws have an anti-discrimination clause(s) – no racial, religious, gender, sexual orientation, disability or ethnic discrimination bars anyone from membership? _____

Are all members recognized as equals? _____

Do all members have democratic control of the Co-operative? _____

Is the Co-operative member-owned and member-managed? _____

Member- Printed Name x Number

Member- Printed Name x Number

Member- Printed Name x Number

Member- Printed Name x Number

Member- Printed Name x Number

Member- Printed Name x Number

Member- Printed Name x Number

This I.W.W. Co-operative Clearance has been prepared and submitted by:

Name(s) _____

(Please Print)

Position(s) within the Co-operative _____

I.W.W. X Number (s) _____

Signature(s) _____

GHQ

Bylaws _____ Members in good standing _____ Means test _____

All Secretary Reports received _____ All Delegate Reports received _____

Delegate Clearance _____ I.W.W. Directory changes _____

Annual Clearance Stamp sent _____